



**At a glance**

**Policy 13AN0**  
**Members - Plan 1**  
CORPORATION DES THÉRAPEUTES DU SPORT DU QUÉBEC (MODULE 1)  
**September 1, 2022**

This document contains important information. Please keep it for future reference.

SSQ, Life Insurance Company Inc.

## **Your Group Insurance Plan At a Glance**

SSQ has issued this document as an outline of your group insurance plan effective September 1, 2022.

This document does not modify the provisions of your insurance policy in any way. To consult the complete description of your plan, including the applicable exclusions, limitations and restrictions, you may visit the secure site for insureds at **ssq.ca**.

If the information you are looking for cannot be found in this document or in the insurance booklet available on the secure site for insureds, you may consult your plan administrator or SSQ's Customer Service department.

Class: Members - Plan 1

Group(s): 13AN0

Policy: 13AN0

In this document, "SSQ Insurance (or SSQ)" refers to SSQ, Life Insurance Company Inc.

## **NOTICE OF CONSTITUTION OF A FILE AND PERSONAL INFORMATION USE**

### **Notice of constitution of a file**

The protection of the personal information that we obtain through our activities is very important to SSQ Insurance. This is why, to maintain the confidentiality of personal information, SSQ Insurance (SSQ, Life Insurance Company Inc., SSQ Distribution Inc. and their subsidiaries) will create an insurance file to contain your personal information. The information we collect in different instances, including insurance applications, renewals, modifications or claims, will be added to your file. Except for certain exceptions stipulated by law, access to this file is restricted to those SSQ Insurance employees, service providers, agents or any other person you may authorize to access this information when required to fulfill their contract or mandate.

This file is kept at SSQ Insurance's offices or authorized third-party premises. You have the right to consult the personal information held in your file and, if necessary, have it changed by submitting a written request to the Personal Information Protection Officer at the address below.

### **Personal Information Protection Officer**

SSQ Insurance, 2525 Laurier Boulevard, P.O. Box 10500, Stn Sainte-Foy, Quebec City QC G1V 4H6

### **Collection and use of your personal information**

SSQ Insurance only collects information that is necessary for the management and administration of the business relationship we have with you and any other information obtained through your interactions with us.

The personal information we collect, store and use allows us to verify your identity, validate your eligibility for our products and services, estimate insurance risk, determine premiums, process your claims, manage your file and meet legal requirements. It also may be used to improve our products, services, campaigns and promotions based on statistical analyses. If you have given us your social insurance number, it will only be used for administrative and fiscal purposes.

**To learn more about our personal information protection practices, go to [ssq.ca](http://ssq.ca).**

## **AVAILABLE INFORMATION ON YOUR GROUP INSURANCE PLAN**

If your contract has been modified since the production date of this booklet, there may be wording differences between the booklet and the policy. If so, the policy wording will prevail; hence, you are entitled to consult the policy at the policyholder's address and obtain a copy thereof.

The masculine gender is used throughout this document solely for readability purposes and applies to both men and women.

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# SCHEDULE OF INSURANCE

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## General Provisions

This document shows the contractual provisions in force on September 1, 2022.

<b>Group Name(s) and No(s).</b>	13AN0 CORPORATION DES THÉRAPEUTES DU SPORT DU QUÉBEC (MODULE 1)
<b>Class</b>	Members - Plan 1
<b>Category of individuals eligible as participants</b>	All members who have chosen module 1 working at least 15 hours a week for the policyholder.
<b>Eligibility date for new employees</b>	Employment date
<b>End of "own occupation" period for definition of total disability</b>	After 24 months of a same period of total disability

### Notes:

#### Layoff

#### Maintaining participation in insurance

Contrary to what is indicated under paragraph "Maximum duration for maintaining participation in insurance during a period of interruption of work other than a temporary layoff" of the "Temporary interruption of work" section, during a period of interruption of work other than a temporary layoff, all benefits are maintained, with premium payment, up to 12 months. During a maternity or a paternity leave, all benefits are maintained, with premium payment, up to a maximum of 24 months.

#### General information

#### Participation rules (1 of 3)

During the initial enrollment period of the modular plan, if you are already eligible for insurance as a participant and provided you are not totally disabled or temporarily absent from work, you must choose the module (1 or 2) that will apply to both Health Care Insurance benefits. If you become eligible at a later time, your choice will have to be made in the 31 days following your eligibility. In the absence of such a choice during the initial enrollment period or in the 31 days following your eligibility, you will be granted module 1. During the initial enrollment period of the modular plan, if you are totally disabled or temporarily absent from work, the module you had with the previous insurer will be carried forward.

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# SCHEDULE OF INSURANCE

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## General Provisions (continued)

### Notes:

#### Participation rules (2 of 3)

It will be possible to benefit from enrollment periods to select a new module but only after 2 years of participation in a same module have elapsed and provided you are not then totally disabled or temporarily absent from work. The frequency of enrollment periods will be as agreed between the Policyholder and SSQ. Outside designated enrollment periods, it is possible to select a new module only after one of the following events occurs, provided your request is made in the 31 days following that event and that you are not then totally disabled or temporarily absent from work: 1) a group insurance plan by which your spouse or your dependent child was covered as a participant is involuntarily lost; 2) a person becomes or ceases to be your spouse; 3) a person becomes your dependent child; 4) a person ceases to be your sole dependent child.

#### Participation rules (3 of 3)

In no time may totally disabled participants or participants who are temporarily absent from work change from one module to another. However, they can do so on the date they actively return to work by submitting their request to SSQ no later than 31 days after that date.

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## SCHEDULE OF INSURANCE

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### Life Insurance Plan

#### Participant's Life Insurance

Amount of insurance	\$10,000
Termination of insurance	The day you reach age 70

#### Spouse's Life Insurance

Amount of insurance	\$5,000
Termination of insurance	The day you reach age 70

#### Dependent Children's Life Insurance

Amount of insurance	Dependent children age 24 hours and older: \$2,500
Termination of insurance	The day you reach age 70

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## SCHEDULE OF INSURANCE

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### Accidental Death & Dismemberment Insurance Plan

#### Participant's Accidental Death and Dismemberment Insurance

Amount of insurance	\$10,000
Termination of insurance	The day you reach age 70

# SCHEDULE OF INSURANCE

## Health Care Insurance Plan

### Health Insurance

**Deductible per calendar year:**

Individual: \$50

Family: \$100

Single-parent \$100

Couple: \$100

Coverage	Maximum	Deductible	Percentage of reimbursement
<b>Prescription Drugs</b>			
Drugs with SSQ card - Direct payment system *			70%
Per service deductible : \$7			
Drugs - Patient's contribution *			70%
Per service deductible : \$7			
Sclerosing injections *	\$20 eligible per day		70%
Per service deductible : \$7			
Preventive vaccines (immunizing products)	\$200 reimbursement per calendar year per insured		70%
Per service deductible : \$7			
<b>Hospitalization</b>			
Hospital room	Semi-private room		100%
<b>Specialized Health Care Establishments</b>			
Convalescent home *	Semi-private room 60 day(s) per calendar year per insured	√	70%
<b>Health Care Professionals</b>			
Chiropracist - X-rays	\$50 reimbursement per calendar year per insured	√	70%

# SCHEDULE OF INSURANCE

## Health Care Insurance Plan

### Health Insurance (continued)

Coverage	Maximum	Deductible	Percentage of reimbursement
Chiropractor - X-rays	\$50 reimbursement per calendar year per insured	√	70%
Osteopath - X-rays	\$50 reimbursement per calendar year per insured	√	70%
Podiatrist - X-rays	\$50 reimbursement per calendar year per insured	√	70%
	Combined maximum for the following: Acupuncturist; Audiologist; Chiropodist; Chiropractor; Dietitian; Homeopath; Homeopathic medicines; Kinesitherapist; Massage therapist; Naturopath; Occupational therapist; Orthotherapist; Osteopath; Physiotherapist; Podiatrist; Psychiatrist; Psychoanalyst; Psychologist; Social worker; Speech therapist \$300 reimbursement per calendar year per insured		
Acupuncturist	\$57 eligible per treatment	√	70%
Audiologist	\$57 eligible per consultation	√	70%
Chiropodist	\$57 eligible per treatment	√	70%
Chiropractor	\$57 eligible per treatment	√	70%
Dietitian	\$57 eligible per consultation	√	70%
Homeopath	\$57 eligible per consultation	√	70%
Homeopathic medicines *	\$57 eligible per prescription	√	70%
Kinesitherapist	\$57 eligible per treatment	√	70%
Massage therapist	\$57 eligible per treatment	√	70%
Naturopath	\$57 eligible per consultation	√	70%
Occupational therapist	\$57 eligible per treatment	√	70%
Orthotherapist	\$57 eligible per treatment	√	70%
Osteopath	\$57 eligible per treatment	√	70%

# SCHEDULE OF INSURANCE

## Health Care Insurance Plan

### Health Insurance (continued)

Coverage	Maximum	Deductible	Percentage of reimbursement
Physiotherapist, physical rehabilitation therapist and certified athletic therapist	\$57 eligible per treatment	√	70%
Podiatrist	\$57 eligible per treatment	√	70%
Psychiatrist	\$57 eligible per consultation	√	70%
Psychoanalyst	\$57 eligible per consultation	√	70%
Psychologist	\$57 eligible per consultation	√	70%
Social worker	\$57 eligible per consultation	√	70%
Speech therapist	\$57 eligible per consultation	√	70%
<b>Vision Care</b>			
	Combined maximum for the following: Optometrist (eye exam); Ophthalmologist (eye exam) \$100 eligible per 24 consecutive months per insured		
Optometrist (eye exam)			100%
Ophthalmologist (eye exam)			100%
	Combined maximum for the following: Optometrist (eye exam) - children; Ophthalmologist (eye exam) - children \$100 eligible per 12 consecutive months per insured		
Optometrist (eye exam) - children			100%
Ophthalmologist (eye exam) - children			100%
<b>Other Medical Expenses</b>			
Ambulance		√	70%

# SCHEDULE OF INSURANCE

## Health Care Insurance Plan

### Health Insurance (continued)

Coverage	Maximum	Deductible	Percentage of reimbursement
Transport by airplane or train *		√	70%
Blood glucose monitor *	\$250 reimbursement per 36 consecutive months per insured	√	70%
Breast prostheses *	\$1,000 reimbursement per 24 consecutive months per insured	√	70%
Dental treatment required following accidental damage to natural teeth	reimbursement in the 12 months following the accident per insured	√	70%
External prosthesis and artificial limb *		√	70%
Foot orthoses *	\$300 reimbursement per calendar year per insured	√	70%
Hearing aid	\$500 reimbursement per 48 consecutive months per insured	√	70%
Hospital bed *		√	70%
Insulin pump *	\$7,500 reimbursement per 60 consecutive months per insured	√	70%
Insulin pump accessories *		√	70%
Intraocular lens implants *	\$1,000 reimbursement for duration of contract per insured	√	70%
Intrauterine devices (IUDs) *		√	70%
Nurse *	\$300 eligible per day \$10,000 reimbursement per calendar year per insured	√	70%
Orthopaedic devices *		√	70%
Orthopaedic shoes *		√	70%
Ostomy appliances *		√	70%

# SCHEDULE OF INSURANCE

## Health Care Insurance Plan

### Health Insurance (continued)

Coverage	Maximum	Deductible	Percentage of reimbursement
Out-of-province medical referral	\$10,000 reimbursement per calendar year per insured		80%
Respirator (breathing apparatus) *	\$10,000 reimbursement for duration of contract per insured	√	70%
Support stockings *	3 pair(s) per calendar year per insured	√	70%
Surgical brassieres *	\$200 reimbursement for duration of contract per insured	√	70%
Therapeutic devices *	\$10,000 reimbursement for duration of contract per insured	√	70%
Transcutaneous electrical nerve stimulator *	\$800 reimbursement per 60 consecutive months per insured	√	70%
Wheelchair and walker *		√	70%
Wig *	\$300 reimbursement for duration of contract per insured	√	70%
	Combined maximum for the following: CAT scans; Electrocardiograms (ECG); Laboratory analyses; Magnetic resonance imaging; Ultrasound examinations; X-rays \$1,000 reimbursement per calendar year per insured		
CAT scans *		√	70%
Electrocardiograms (ECG) *		√	70%
Laboratory analyses *		√	70%
Magnetic resonance imaging *		√	70%
Ultrasound examinations *		√	70%
X-rays *		√	70%
<b>Travel</b>			
Travel assistance insurance	\$5,000,000 reimbursement per trip per insured		100%

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# SCHEDULE OF INSURANCE

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## Health Care Insurance Plan

### Health Insurance (continued)

Coverage	Maximum	Deductible	Percentage of reimbursement
Travel cancellation insurance	\$5,000 reimbursement per trip per insured		100%
<b>Other Services</b>			
Medical assistance			100%

\* Medical prescription required

#### Notes:

##### Drugs - Annual Out-of-Pocket Amount

Once the annual out-of-pocket maximum provided under the BPDIP is reached, expenses incurred subsequently during the same calendar year for drugs covered by the RAMQ are reimbursed at 100%. The annual out-of-pocket maximum includes expenses incurred for drugs covered by the RAMQ only. This annual out-of-pocket maximum applies to each insured person and only your own out-of-pocket amount includes drug expenses for your dependent children.

##### Reimbursement of brand name drugs

If you choose to purchase a brand name drug instead of any existing generic equivalent, the amount of reimbursement will be determined in accordance with its lowest cost generic equivalent. However, it is possible to obtain a reimbursement based on the cost of the brand name drug that cannot be substituted for medical reasons, by submitting the appropriate form, duly completed by the attending physician, and provided the request is approved by SSQ.

## HOW TO SUBMIT CLAIMS TO SSQ INSURANCE?

Thanks to our **on-line services**, you can submit your claims in one of several ways:

- 1 Use your SSQ insurance card at the pharmacy (reimbursement of your prescription drug expenses).
- 2 Fill out the personalized claim forms available on the secure site for insureds.
- 3 Use your smart phone to submit your benefit claims.

To download the application free of charge, go to [ssq.ca/mobile](https://ssq.ca/mobile).

## HOW TO REGISTER FOR THE SECURE SITE FOR INSUREDS?

To access the secure site for insureds, go to **ssq.ca** and click on the login button as a group insurance member.

On your first visit, follow the instructions to register. You will only need your certificate number to access the many functionalities offered by the secure site for insureds.

## **THE SECURE SITE FOR INSUREDS SAVES YOU TIME!**

### **Direct deposit of your benefit payments**

To select the direct deposit of your benefits for faster reimbursement of your expenses, go to the secure site for insureds and follow the instructions to register.

You will be required to provide your banking information, which is printed at the bottom of your cheques.

**In addition to being fast and easy to use, the secure site for insureds offers a variety of online transactions such as:**

- Register for direct deposit and electronic claim statements of your health, dental care or disability insurance benefits;
- Consult a list of your benefits;
- Consult the electronic version of your group insurance booklet;
- View the details of reimbursements made for each of your benefits;
- View your contact information;
- Print a temporary SSQ insurance card.

## **USE YOUR SMART PHONE TO SUBMIT YOUR CLAIMS!**

Thanks to the SSQ Mobile Services application, you can now submit your claims directly from your *iPhone* or *Android* smart phone.

In addition to submitting your group insurance claims, you can also use the application to:

- Consult a summary of previous claim payments;
- Consult an electronic version of the SSQ insurance card;
- Contact our Customer Service in a single click.

To download the application or for more information, go to [ssq.ca/mobile](https://ssq.ca/mobile).



Discover our on-line services by registering today at our  
secure site for insureds.

SSQ Customer Service  
Toll free: 1-888-651-8181